



Covid-19 Induced Lockdown and Its Long Term Implications On Mental Health of Adolescents In Kashmir

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ABSTRACT

The COVID-19 lockdown has significantly impacted adolescents' mental health, leading to increased restlessness, irritability, impatience, and heightened emotional distress. With reduced social interactions and more time spent on screens, adolescents have faced considerable psychological challenges. Studies highlight their vulnerability to anxiety and depression due to these disruptions. Excessive social media use has exacerbated these issues, further diminishing their well-being. Addressing adolescents' mental health during and after the pandemic is crucial, emphasizing the need for supportive environments and balanced routines to mitigate the adverse effects on their psychological health.

Keywords: COVID-19 pandemic, global perspectives, lockdown, social distancing, public health, mental wellbeing, anxiety, sleepless nights.

1. Introduction

The COVID-19 induced lockdown has significantly disrupted daily life across the globe, often resulting in adverse effects on mental well-being. These conditions have triggered a range of psychological symptoms, including emotional fatigue, irritability, anxiety, increased anger, depressive manifestations, and post-traumatic stress disorder. Home confinement due to COVID-19 has instilled a sense of fear and anxiety worldwide, leading to both short-term and long-term psychological and mental health impacts across all age groups. The restrictions on movement during lockdown have greatly reduced social interactions with family, friends, and neighbours, as well as limited entertainment options, which has considerably decreased life satisfaction, as evidenced by various studies. Excessive use of social media has shown detrimental effects on mental and social well-being, as revealed in a study from Saudi Arabia. Older adults, highly educated individuals, and those from higher social strata have been particularly affected by the lack of social interaction. Children have also been significantly impacted by quarantine, showing signs of increased restlessness, impatience, irritability, annoyance, and inattention, along with more time spent on screens. Gender differences in psychological stress were observed, with females experiencing more stress than males. This disparity is possibly due to women being homebound more often and facing family issues, household burdens, and physical and emotional abuse from intimate partners.

The constant influx of COVID-19 information from social media, family, friends, and authorities has heightened anxiety among the population. Studies have shown that a majority of respondents reported high levels of stress, anxiety, and depression. Older adults with cognitive decline were particularly vulnerable to anxiety and depression, as suggested by research from China. College students in China also experienced mild to severe anxiety, anger, and confusion during the lockdown. Many studies have found that isolation and quarantine have a significant psychological impact, with those in community quarantine being more affected psychologically than those in home self-quarantine. Following quarantine, people showed signs of mental health problems, including PTSD. Suicidal thoughts and suicides during the lockdown period were caused by high levels of stress brought on by anxiety and worry about contracting COVID-19, financial difficulties, the strain of isolation and quarantine, loneliness, and the unavailability of addictive substances like alcohol. Interestingly, avoiding COVID-19 news updates and maintaining a balanced diet were found to be the best predictors of lower levels of anxiety and depressive symptoms.

2. Review of Literature:

Children and Adolescents:

Goush et al. (2020): Observed significant psychosocial impacts on children due to school closures, cancelled trips, home confinements, and fear of the pandemic, leading to distress and uncertainty.

Imran et al. (2020): Found children highly affected by quarantine, displaying increased restlessness, impatience, irritability, and inattention, with more screen time during lockdown.

General Population:

Wilder-Smith & Freedman (2020): Noted the global disruption caused by COVID-19 lockdowns, linking it to emotional fatigue, irritability, anxiety, increased anger, depression, and post-traumatic stress.

Ammar et al. (2020): Surveyed the negative impacts of home confinement on social participation and life satisfaction, with reduced social activity and entertainment options leading to widespread anxiety and decreased life satisfaction.

Social Media and Isolation:

Al-Qahtani et al. (2020): Highlighted the detrimental effects of excessive social media use on mental and social well-being, especially among older adults, highly educated individuals, and those from higher social strata due to reduced social interaction.

Lima et al. (2020): Found that continuous COVID-19 information from social media and other sources increased anxiety, with isolated older adults with cognitive decline being particularly vulnerable to anxiety and depression.

Gender Differences and Vulnerable Groups:

Evans et al. (2020): Reported that women experienced more psychological stress than men, attributed to being homebound, dealing with family issues, household chores, and intimate partner violence.

Rettie & Daniels (2020): Found higher stress and anxiety levels in pregnant women, individuals with pre-existing health issues, economically disadvantaged people, and older adults with chronic conditions.

Severe Psychological Impacts:

Caballero-Domínguez et al. (2020): Documented high stress levels leading to suicidal thoughts and actions during the lockdown, driven by fear of infection, financial crises, quarantine, isolation, and lack of access to addictive substances like alcohol. This literature collectively underscores the widespread and profound psychological impacts of the COVID-19 pandemic, emphasizing the need for targeted mental health support and interventions.

OBJECTIVE

This study's main goal was to evaluate how mental health changed throughout the COVID-19 pandemic among adolescents. We sought to find the effect of covid-19 induced lockdown and home confinement on mental health wellbeing and psychological behaviour by looking at the stress levels during and after the pandemic.

METHODOLOGY

This study was conducted in the Kashmir Valley, focusing on school-going adolescents aged between 10 to 19 years. A self-structured questionnaire was designed to collect data on mental health during and after the COVID 19 pandemic. The questionnaire included items related to anxiety, depression, stress, and emotional well-being.

Data Collection

Participants: Adolescents aged 10-19 years, attending schools in the Kashmir Valley.

Instrument: Self-structured questionnaire focusing on mental health indicators.

Content: The questionnaire covered:

- Levels of anxiety (e.g., frequency of anxious feelings)
- Symptoms of depression (e.g., persistent sadness, loss of interest)
- Stress levels (e.g., perceived stress scale)
- Overall emotional well-being (e.g., mood changes, emotional regulation)

Data Sampling

Locations: Data were collected from both urban and rural areas to capture variations in mental health across different environments.

Periods: Data were gathered for two distinct periods:

- During the COVID-19 lockdown
- After the lockdown restrictions were lifted

Data Analysis

Comparison of Mental Health Indicators: The study aimed to compare levels of anxiety, depression, stress, and emotional well-being during and after the lockdown.

Influence of Demographic Factors: Identifying demographic factors (e.g., age, gender, urban/rural location) linked to changes in mental health status.

Statistical Techniques: Appropriate statistical methods were used to analyze the data, identify significant differences, and determine correlations.

This methodology seeks to understand the impact of the COVID-19 pandemic on the mental health of adolescents in the Kashmir Valley, considering the influence of demographic and contextual factors.

RESULTS

Globally, the lockdown caused by COVID-19 has severely disrupted life, and it is often linked to negative effects on mental health. These disorders initiate a cascade of psychological and mental symptoms, such as emotional exhaustion, sensitivity to touch, anxiety, heightened irritability, depressive symptoms, and post-traumatic stress disorder. Following tables reveal the results reported on mental health status of adolescents.

Table 1. Mental health check list of adolescents.

Section A

Do you suffer from it?			
		Total	
		F	Percent
Anxiety/ tension	Always	140	11.7
	Often	521	43.4
	At time	472	39.3
	Rarely	67	5.6
	Total	1200	100.0
Restlessness	Always	165	13.8
	Often	469	39.1
	At time	394	32.8
	Rarely	172	14.3
	Total	1200	100.0
Nervousness	Always	171	14.3
	Often	412	34.4
	At time	478	39.9
	Rarely	137	11.4
	Total	1198	100.0
Loneliness	Always	254	21.2
	Often	427	35.6

	At time	391	32.6
	Rarely	128	10.7
	Total	1200	100.0
Hopelessness	Always	289	24.1
	Often	425	35.4
	At time	365	30.4
	Rarely	121	10.1
	Total	1200	100.0
Anger	Always	790	65.8
	Often	97	8.1
	At time	291	24.2
	Rarely	22	1.8
	Total	1200	100.0

Section B

Do you also suffer from it?		Total	
		F	Percent
Headache	Always	161	13.4
	Often	592	49.4
	At time	397	33.1
	Rarely	49	4.1
	Total	1199	100
Tiredness	Always	324	27.0
	Often	537	44.8
	At time	233	19.4
	Rarely	106	12.2
	Total	1200	100
Disturbed sleep	Always	324	27.0
	Often	466	38.8
	At time	335	27.9
	Rarely	75	6.2

	Total	1200	100.0
Indigestion	Always	576	48.0
	Often	355	29.6
	At time	191	15.9
	Rarely	78	6.4
	Total	1200	100.0
Acidity	Always	583	48.6
	Often	332	27.7
	At time	215	17.9
	Rarely	70	5.9
	Total	1200	100.0

The section A of table1 reveals that there is a significant increase in mental health issues among the adolescent population. 'Anger' among adolescents is a common issue due to hormonal changes. However, during Covid-19 pandemic the anger issues among adolescents were seen to be drastically increased as 65.8% of the respondents stated to have anger most of the time throughout the lockdown period. In the table, it has been reported that 43.4 %, 39.1%, 34.4 %, 35.6% and 35.4% of the respondents often have anxiety, restlessness, nervousness, loneliness and hopelessness respectively in their life. The section B of table1 indicates that the majority of respondents often suffer from headache (49.4%), tiredness (44.8%) and disturbed sleep (38.8%). Whereas, the respondents also indicated that indigestion (48%) and acidity (48.6%) was always prevalent during covid-19 lockdown.

Table 2: Covid 19 pandemic restriction outcome on mental health

During covid-19	F	Percentage
It has got much worse	805	67.1
It has got a bit worse	152	12.7
It is about the same	100	8.3
It has got a bit better	103	8.6
It has got much better	18	1.5
I don't know	22	1.8
Total	1200	100.0

The Covid 19 pandemic restrictions have had a significant impact on adolescent's mental health including increased stress and anxiety, feeling of isolation and loneliness, disrupted sleep patterns and worsening of existing mental health conditions as is shown by Table 2, where majority of respondents (67.1%) agreed that their mental health got much worse during covid 19 pandemic.

Table 3: Comparative study of mental health stress during and after lockdown.

Stress level	At the movement		During Lockdown	
	F	Percentage	F	Percentage
Very stressed	70	5.8	825	68.8
Stressed	88	7.3	181	15.1
Neither stressed nor calm	133	11.1	99	8.3
Calm	623	51.9	89	7.4
Very calm	286	23.8	6	.5
Total	1200	100.0	1200	100.0

Table 3 reported that the majority of respondents were very stressed during lockdown which constituted 68.8% respondents. The increased stress level was prevalent due to uncertainty and fear of pandemic, social isolation and confinement, disruption of routine and normal life, academic pressures and online learning. While as after lockdown i.e., at the movement, the majority of respondents are calm (51.9%) as revealed by the table.

Conclusion

The COVID-19 pandemic necessitated widespread lockdowns, disrupting daily life and educational systems globally. This unprecedented situation had a profound impact on the mental health of adolescents, a particularly vulnerable population. School closures, a cornerstone of adolescent social and academic development, were among the most significant disruptions. The absence of in-person interaction with peers and teachers led to feelings of isolation, anxiety about academic performance, and decreased motivation. This, coupled with the loss of extracurricular activities and routines, contributed to a decline in overall well-being.

The digital age, while offering connectivity, also presented challenges. Increased screen time, often a substitute for social interaction, was linked to sleep disturbances, difficulty concentrating, and exposure to negative online content. This, combined with the pressure of remote learning, amplified academic stress and exacerbated existing mental health issues. Family dynamics were also affected. Parental stress, influenced by job loss, financial worries, and the challenges of home-schooling, created tension within households. Adolescents, sensitive to environmental changes, absorbed this stress, leading to increased anxiety and conflict.

Fear and uncertainty surrounding the virus itself contributed to a heightened state of anxiety among adolescents. Concerns about personal health, the health of loved ones, and the future exacerbated existing mental health conditions and triggered new ones. In conclusion, the COVID-19 lockdowns had a detrimental impact on the mental health of adolescents. The combination of social isolation, academic pressures, increased screen time, family stress, and fear created a perfect storm for mental health challenges. It is imperative to prioritize mental health support and resources for this age group as they navigate the long-term effects of the pandemic.

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